

BEST AVAILABLE COPY

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO. 10/01 8421		FILING DATE 13 DEC 2001	
						APPLICANT(S) <i>Potthoff</i>			
CLAIMS									
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.
1							51		
2							52		
3							53		
4							54		
5							55		
6							56		
7							57		
8							58		
9							59		
10							60		
11							61		
12							62		
13							63		
14							64		
15				/			65		
16				/			66		
17				/			67		
18				/			68		
19				/			69		
20				/			70		
21				/			71		
22				/			72		
23				/			73		
24				/			74		
25				/			75		
26				/			76		
27							77		
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41							91		
42							92		
43							93		
44							94		
45							95		
46							96		
47							97		
48							98		
49							99		
50							100		
TOTAL IND.			1				TOTAL IND.		
TOTAL DEP.			12				TOTAL DEP.		
TOTAL CLAIMS			13				TOTAL CLAIMS		